2020 Jan-17 PM 02:31 U.S. DISTRICT COURT N.D. OF ALABAMA

Pro Se 7 (Rev. 09/16) Complaint for Employment Discrimination

## UNITED STATES DISTRICT COURT

for the

Northern District of Alabama

2020	JAN	17	Д	10:	51
1986					

Paiscilla Fields	Case No. 2:20-cv-00088-JEO	
Plaintiff  (Write your full name. No more than one plaintiff may be named in a pro se complaint.)  )	Jury Trial: (check one) Yes No	
-v- ) )		
Defendant(s)  (Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page		
with the full list of names.)  COMPLAINT FOR EMPLOY	YMENT DISCRIMINATION	
I. The Parties to This Complaint		

## A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	PRISCILLA FIELOS	
Street Address	5730 Cheshine Circle Cove	_
City and County	Mc Calla , Jefferson	
State and Zip Code	Alahama 35111-5011	
Telephone Number	205-200-7455	
E-mail Address	prisfields III@gmail.com	

Pro Se 7 (Rev. 09/16) Complaint for Employment Discrimination	Pro S	Se 7	'(Rev.	09/16)	Com	plaint	for E	mplor	vment	Discri	minat	ion
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-  7-2  ate	2020 Participant Sig	gnature
В.	The Defendant(s)	
	individual, a government agency, a	each defendant named in the complaint, whether the defendant is arn organization, or a corporation. For an individual defendant, nown). Attach additional pages if needed.
	Defendant No. 1	
	Name	T-Mahile
	Job or Title (if known)	12920 SE 38th Street
	Street Address	38th Street
	City and County	Bellevue
	State and Zip Code	WA 98006
	Telephone Number	
	E-mail Address (if known)	
	Defendant No. 2	
	Name	
	Job or Title (if known)	
	Street Address	
	City and County	
	State and Zip Code	
	Telephone Number	
	E-mail Address (if known)	
	Defendant No. 3	
	Name	
	Job or Title (if known)	
	Street Address	
	City and County	
	State and Zip Code	
	Telephone Number	
	E-mail Address (if known)	

)	7 (Bass 00/	16) C	din for Frankrije a Division at	
10 36	/ (Rev. 09/	16) Compia	aint for Employment Discrimination	
		- a		
		Defe	ndant No. 4	
			Name	
			Job or Title (if known)	
			Street Address	
			City and County	
			State and Zip Code	
			Telephone Number	
			E-mail Address (if known)	
	C.	Place	e of Employment	
		The a	address at which I sought emplo	yment or was employed by the defendant(s) is
			Name	T-Mobile
			Street Address	820 Tom Mortin Dr.
			City and County	Birming hom
			State and Zip Code	Alahoma 352111
			Telephone Number	205-769-8993
II.	Rasis	for Jur	risdiction	
•••				mployment pursuant to (check all that apply):
	11115		oroughe for disormination in o	improgramment pursuant to teneer an man apply).
			Title VII of the Civil Right	s Act of 1964, as codified, 42 U.S.C. §§ 2000e to 2000e-17 (race,
			color, gender, religion, nati	ional origin).
				uit in federal district court under Title VII, you must first obtain a r from the Equal Employment Opportunity Commission.)
			Age Discrimination in Emp	ployment Act of 1967, as codified, 29 U.S.C. §§ 621 to 634.
				uit in federal district court under the Age Discrimination in first file a charge with the Equal Employment Opportunity
			Americans with Disabilitie	s Act of 1990, as codified, 42 U.S.C. §§ 12112 to 12117.
			· · · · · · · · · · · · · · · · · · ·	uit in federal district court under the Americans with Disabilities  Notice of Right to Sue letter from the Equal Employment
			Other federal law (specify the	e federal law):

Pro Se	Pro Se 7 (Rev. 09/16) Complaint for Employment Discrimination						
			lobomo				
	Relevant state law (specify, if known):						
			labamu				
		_	vant city or county law (specify, if known):				
			pirk ming ho in				
III.	State	ment of Claim					
	facts involuthe da	showing that each wed and what each ates and places of	In statement of the claim. Do not make legal arguments. State as briefly as possible the h plaintiff is entitled to the damages or other relief sought. State how each defendant was h defendant did that caused the plaintiff harm or violated the plaintiff's rights, including f that involvement or conduct. If more than one claim is asserted, number each claim and statement of each claim in a separate paragraph. Attach additional pages if needed.				
	A.	The discrimina	atory conduct of which I complain in this action includes (check all that apply):				
			Failure to hire me.				
			Termination of my employment.				
			Failure to promote me.				
			Failure to accommodate my disability.				
			Unequal terms and conditions of my employment.				
			Retaliation.				
			Other acts (specify):				
			(Note: Only those grounds raised in the charge filed with the Equal Employment Opportunity Commission can be considered by the federal district court under the federal employment discrimination statutes.)				
	В.	It is my best re	ecollection that the alleged discriminatory acts occurred on date(s)				
		Iwast	erminated while one Medical Leave 2/9019-3/2019				
	C.	I believe that o	defendant(s) (check one):				
			is/are still committing these acts against me.				
			is/are not still committing these acts against me.				

D.	Delei			my (check all that apply and explain):
			race _ color	
			-	
			gender/sex	
			religion _	
			national origin	(authorities and all and disconniction)
			age (year of birth)	(only when asserting a claim of age discrimination.)
				I disability (specify disability)
			gente ame	ty discrete t
	E.	The facts of m	y case are as follows. A	ttach additional pages if needed.  700 Employers. I Loval My job;  ove Employer, at work on time blood when within
		Twes	a very product	ive employee, at work on time doily when not st
		My past out on o	Employer cou modical leave	asped me to relepse. The year 2017 I we of Absence for the same condition. I me dup to un fair treatment. The year 201
		Consulted	EECC at they ti	alc dup to Un july
		I requirée	touther LOAG	come accomodations) but was donied by usi
		(Note: As add your charge fi	itional support for the fo	acts of your claim, you may attach to this complaint a copy of oyment Opportunity Commission, or the charge filed with the
IV.	Exha	ustion of Federal	Administrative Remed	ies
	Α.	It is my best re my Equal Emp on (date)	ecollection that I filed a colloyment Opportunity co	charge with the Equal Employment Opportunity Commission or bunselor regarding the defendant's alleged discriminatory conduct
		3/2	4/2019	
	B.	The Equal Em	ployment Opportunity C	Commission (check one):
		, 🗸	has not issued a Notic	e of Right to Sue letter.
			issued a Notice of Rig	ght to Sue letter, which I received on (date) 10/28/2019.
				of the Notice of Right to Sue letter from the Equal Employment ion to this complaint.)

I had a physical decumental filed \$1/17/20 Page 6 of 9

I had a physical decumental form physical from the year from De Julian phone for the form on time. I was constantly body sont on time. I was constantly body sont on time. I was constantly body sont of my in as to have him for well second green henself. I confact that well and form on an entential the my element was a year of the my phone fits - To white HR and short of him to went to work a form henselfs - To white HR and short of him to wont to work a form henselfs - To white HR and short of him henselfs - To white HR

Prisella 4/8/15

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1-17-2020

Allached Pognofords

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	C.	Only litigants alleging age discrimination must answer this question.						
		Since filing my charge of age discrimination with the Equal Employment Opportunity Commission regarding the defendant's alleged discriminatory conduct (check one):						
		60 days or more have elapsed.						
		less than 60 days have elapsed.						
v.	Relief							
	arguments. Include any basis for claiming that the wrongs alleged are continuing at the present time. Include amounts of any actual damages claimed for the acts alleged and the basis for these amounts. Include any punior exemplary damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages. I'm seeking relief for Loss wages a relight for Loss wages a relight for Loss wages a relight for Loss wages a few for put me in states of mental anguish and being denied employment for other jobs via background chaefur therefore any compensatory do mayer							
VI.	Certific	cation and Closing						
	and bel unneces nonfrive evident opportu	Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, ief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause ssary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a colous argument for extending, modifying, or reversing existing law; (3) the factual contentions have iary support or, if specifically so identified, will likely have evidentiary support after a reasonable unity for further investigation or discovery; and (4) the complaint otherwise complies with the ments of Rule 11.						
	Α.	For Parties Without an Attorney						
		I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.						
		Date of signing: 1-17-2020						
		Signature of Plaintiff						

PRISCILLO Fields

Printed Name of Plaintiff

## Pro Se 7 (Rev. 09/16) Complaint for Employment Discrimination

В.

For Attorneys	
Date of signing:	
Signature of Attorney	
Printed Name of Attorney	
Bar Number	
Name of Law Firm	
Street Address	
State and Zip Code	
Telephone Number	
E-mail Address	

EEOC Form 161 (11/16)

U.S. UAL EMPLOYMENT OPPORTUNITY COM

SION

## DISMISSAL AND NOTICE OF RIGHTS

	DIGINIOGAL	AND NOTICE OF	Riomo			
2850	illa Fields Venice Rd Apt 9201 ingham, AL 35211	From:	Birmingham D Ridge Park Pla 1130 22nd Stre Birmingham, A	ace eet		
	On behalf of person(s) aggrieved whose CONFIDENTIAL (29 CFR §1601.7(a))	identity is				
EEOC Charg	e No. EEOC Representati	ve		Telephone No.		
	GLENDA BROV	•				
420-2019-	01655 EO Investigato	<u> </u>		(205) 212-2056		
THE EEO	C IS CLOSING ITS FILE ON THIS CHARG	E FOR THE FOLLO	WING REASON	:		
	The facts alleged in the charge fail to state a cl	aim under any of the s	tatutes enforced b	y the EEOC.		
	Your allegations did not involve a disability as	defined by the America	ans With Disabilitie	s Act.		
	The Respondent employs less than the require	ed number of employee	es or is not otherwi	se covered by the statutes.		
	Your charge was not timely filed with EEOC; in other words, you waited too long after the date(s) of the allege discrimination to file your charge					
X	The EEOC issues the following determination: Based upon its investigation, the EEOC is unable to conclude that the information obtained establishes violations of the statutes. This does not certify that the respondent is in compliance with the statutes. No finding is made as to any other issues that might be construed as having been raised by this charge.					
	The EEOC has adopted the findings of the star	te or local fair employn	nent practices age	ncy that investigated this charge.		
	Other (briafly state)					
		E OF SUIT RIGH				
Discrimina You may fi lawsuit mu	te Americans with Disabilities Act, the Gation in Employment Act: This will be the deal always a substitution and a substitutio	only notice of dismis r federal law based o ipt of this notice; o	ssal and of your roon this charge in or your right to su	ight to sue that we will send you. federal or state court. Your		

Equal Pay Act (EPA): EPA suits must be filed in federal or state court within 2 years (3 years for willful violations) of the

alleged EPA underpayment. This means that backpay due for any violations that occurred more than 2 years (3 years) before you file suit may not be collectible.

On behalf of the Commission

BRADLEY A. ANDERSON.

(Date Mailed)

OCT 28 2019

Enclosures(s)

**District Director** 

CC:

T-MOBILE, USA, INC Mai Ly, Senior Consultant, Inclusion Practices 12920 SE 38th Street Bellevue, WA 98006